

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

THIS SPACE FOR	R OFFICE (JSE ONL	Y
	STATE OF HAW STATE ETHICS COM	705 DEC -9 A	HI117 HATESE

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)						
PART I LOBBYIST						
NAME(Last)	(First)	(Middle)	TELEPHONE			
Hoshida,	Sandra	Yoshiko	(808) 543-9491			
MAILING ADDRESS (Street)			FAX			
P.O. Box 3288			(808) 543-9458			
(City)	(State)	(Zip (Code)			
Honolulu,	Hawaii	9680	1 .			
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE			
Moana Pa'akai, Inc., <i>dba</i> Hawaiian Tug 8	(808) 543-9311					
MAILING ADDRESS (Street)			FAX			
P.O. Box 3288			(808) 543-9458			
(City)	(State)	(Zip 0	Code)			
Honolulu,	Hawaii	9680	1			

PART II ORGANIZATION	· · · · · · · · · · · · · · · · · · ·	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE (808) 543-9311
Moana Pa'akai, Inc., dba Hawaiia	n Tug & Barge	
MAILING ADDRESS (Street)		FAX (200) 542 0459
P.O. Box 3288		(808) 543-9458
(City)	(State)	(Zip Code)
Honolulu,	Hawaii	96801
NAME OF PERSON RESPONSIBLE	FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Sandra Yoshiko Hoshida		(808) 543-9491
MAILING ADDRESS (Street)		FAX (1000) 542 0450
P.O. Box 3288		(808) 543-9458
(City)	(State)	(Zip Code)
Honolulu,	Hawaii	96801

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
[] [x] []	Agriculture Communications & Public Utilities Consumer Protection & Commerce Culture, Arts, Historic Preservation Ecology, Energy Environmental Protection	[] Education [X] Government Operations & Finance [] Hawaiian Affairs [] Health [] Housing	[]	Human Services Intergovernmental Relations, International Affairs Labor & Employment Planning, Land & Water Use Management Public Safety & Corrections	[] [X] []	Science, Technology & Economic Development Tourism & Recreation Transportation Other: (indicate below)
PAR	T IV CERTIFICATION	N OF LOBBYIST				
	I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete. 3 DEC 05					
	(Signature of Lobbyist) (Date)				(Date)	
PAR		N TO LOBBY				
NAME			TIT	LE OF AUTHORIZING OFFICE	RORI	PERSON REPRESENTED
Glenr	Glenn K.Y. Hong President					
NAME	OF ORGANIZATION (if app	olicable)			LEPHO	
Moan	Moana Pa'akai, Inc., <i>dba</i> Hawaiian Tug & Barge					
MAIL	ING ADDRESS (Street)			FA		
P.O.	Box 3288			(8)	08) 543	-9458
Hono	(City) lulu,	(State) Hawaii		(Zip Code 96801	e)	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.						
	(Signat	ture of Authorizing Officer or Person	Repres	sented)		(Date)